

BUSINESS AND PLANNING ACT 2020

APPLICATION FOR THE GRANT OF A PAVEMENT LICENCE

(Please read the guidance notes at the end of this form when completing it. Granted licences will last for two years unless otherwise requested and will be subject to national and local conditions which are available to view along with further guidance at www.norwich.gov.uk)

SECTION 1: APPLICANT DETAILS (INDIVIDUAL APPLICANTS)						
Title: First name(s): KATIE	Surname:					
Postal address: GROVES 65 GROVE ROAD	RECEIVED 6 MAY 2025 LICENSING OFFICE					
Phone (home): e-mail address: Date of birth:	Post code: NE SPL Phone (mobile): NI numb					
SECTION 2: APPLICANT DETAILS - O Name: Registered address:	THER APPLICANTS (e.g. companies)					

Post code:	
Phone (daytime):	Phone (mobile):
e-mail address:	
Registered number (where applicable):	

SECTION 3 - BUSINESS PREMISES DETAILS

Trading name: GROVES

Postal address: 65, GROVE ROAD NORWITH

Post code: NRI 3RL

SECTION 4 – USE OF THE BUSINESS PREMISES				
Which of the following is the above business premises used for? (please ONE of the following options)	select			
Use as a public house, wine bar or other drinking establishment				
Use for the sale of food or drink for consumption on or off the premises				

Both of the above uses

SECTION 5 - AREA OF HIGHWAY PROPOSED TO BE USED

Please provide a description of the area of the highway to which this application relates (please note you are also required to submit a scale plan of this area with your application):

SEE NEXT PAGE



SECTION 6 – RELEVANT PURPOSE THE APPLICATION RELATES TO:	
Which of the following relevant purposes do you wish to put furniture on the highway for? (please select ONE of the following options)	
To sell or serve food or drink supplied from, or in connection with relevant use of, the premises	

For the purpose of consuming food or drink supplied from, or in connection with relevant use of, the premises

Both of the above purposes \

SECTION 7: DAYS AND TIMES

During what times do you propose to place furniture on the highway on each of the following days (please use the 24hr clock, e.g. 10:00 to 20:00):

	Mon	Tues	Wed	Thu	Fri	Sat	Sun
From	08:00	08:00	88°00	08:00	08°00	08:00	\$8°00
То	20°00	70:00	20:00	10:00		Dio	18:00

SECTION 8 - FURNITURE TO BE PLACED ON THE HIGHWAY

Please provide a description of the furniture you propose to place on the highway (please note you are required to provide photographs or brochures of the proposed furniture with your application):

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SECTION 9 – DATE OF APPLICATION

Please state the date that this application for a pavement

SECTION 10 – CHECKLIST FOR DOCUMENTS TO INCLUDE WITH APPLICA	ATION
Please note that your application will not be considered complete as public consultation period of 7 days will not begin unless all of the following documents have been submitted with your application.	nd the
A plan showing the location of the premises shown by a red line, so the application site can be clearly identified	
A plan clearly showing the proposed area covered by the licence in	
relation to the highway	
Copy of current public liability insurance certificate	—
Photos or brochures showing the proposed type of furniture	

Evidence of consent from neighbouring frontager(s) to use footway space outside their property (if applicable)

SECTION 11 - DECLARATIONS BY APPLICANT

- I understand that the Authority is collecting my data for the purposes described on this form and will not be used for any other purpose, or passed on to any other body, except as required by law, without my consent.
- I understand I must hold and maintain public liability insurance up to a value of £5million.
- I understand my application will not be considered to be complete until all the required information has been provided and the application fee has been paid.
- I understand that the application fee paid is non-refundable if my application is refused or if any licence granted is subsequently surrendered or revoked.
- I understand that the Authority is under a duty to protect the public funds it administers, and to this end may use the information I have provided on this form for the prevention and detection of fraud. I understand that it may also share this information with other bodies responsible for auditing or administering public funds for these purposes.

I declare that the information given above is true to the best of my knowledge and that I have not wilfully omitted any necessary material. I understand that if there are any wilful omissions, or incorrect statements made, my application may be refused without further consideration or, if a licence has been issued, it may be liable to revocation.

- I understand that I am required to give notice of my application in accordance with the requirements of the Business and Planning Act 2020 and that failing to do so will lead to the revocation of any licence granted.

Signature:

Print Name:

Date: (0,147,29)

GROVES SHOP 65 GROVE ROAD

2-3m

OFABLE O

TABLE O

5-18m

RECEIVED

6 MAY **20**25

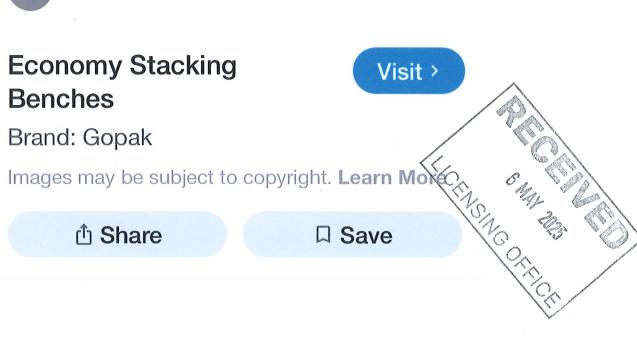
LICENSING OFFICE

3.5m

















Colour: Green



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